Name in Full Jessie Bell America

Certificate of Death

Died at Town Berwyn County Prince George MARYLAND

Date 189 8 Month Nov Day 12 | Age Y. 8 M. 4 D. 12 | Native of Washington DC | Occupation

~~Male~~ White ~~Married~~ Widow ~~Divorced~~

Female ~~Colored~~ Single Widower ~~Number of children living~~

Husband of Wife

Father's Name George Edward America Mother's Name Frances V. America

Cause of Death: Primary Cerebro Spinal Meningitis — How long sick 5 days

Immediate Exhaustion 39a — Accident, Suicide, Homicide

Reported by A. H. Lee, M.D.

Address Berwyn Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, [illegible]

Name in Full Walter Frances Brickerd

Certificate of Death

Died at Town Glenndale County Pr. Geo. Co MARYLAND

Date 189 8 Month Nov. Day 10 | Age Y. 4. M. 4. D. 6 | Native of Wash. D.C. | Occupation

Male ~~Female~~ White ~~Colored~~ ~~Married~~ Single Widow ~~Widower~~ ~~Divorced~~ ~~Number of children living~~

Husband of Wife

Father's Name D. S. Brickerd

Mother's Name Mary A. Brickerd

Cause of Death: Primary Unknown — Immediate Diphtheria Ta

How long sick 3 days

~~Accident~~, Suicide, Homicide

Reported by J. T. Perkins MD

Address Springfield Maryland —

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65968

Name in Full Thomas Ransel Brooks — Certificate of Death

Died at Town Seat Pleasant County Prince Geo 6 MARYLAND

Date 1898 Month Nov Day 10th Age Y. 77 M. 1 D. 7 Day Native of Md Occupation Farmer

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living Seven

Husband ~~Wife~~ of Susan R. Brooks

Father's Name Carrel Brooks Mother's Name Anna Brooks

Cause of Death Primary Immediate Pneumonia 72

How long sick Seven days

~~Accident, Suicide, Homicide~~

Reported by John E Sansbury

Address Forestville Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65969

Name in Full Clone A Brown

Certificate of Death

Died at Town Rosaryville County Pr Geo MARYLAND

Data 189 8 Month Nov Day 27 Age Y. — M. D. Native of Md Occupation Housewife

~~Male~~ ~~White~~ Marriad ~~Widow~~ ~~Divorced~~

Female Colored ~~Single~~ ~~Widower~~ Number of children living

~~Husband~~ Wife of Joseph H Brown

Father's Name Davy Pratt Mother's Name Pracilla Pratt

Cause of Death Primary Pulmonary Phthisis How long sick one year

Immediate Eclamtia 22a Accident, Suicide, Homicide

Reported by Dr W H Gibbons

Address Croom Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Philip Craig

Certificate of Death

Died at Town Bladensburg County P. G. MARYLAND

Date 1898 Month Nov Day 17 | Age Y. 22 M. D. | Native of Md | Occupation Laborer

Male ~~Female~~ | ~~White~~ Colored | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ ~~Number of children living~~

~~Husband~~ Wife of

Father's Name Davy Craig | Mother's Name Alice Craig

Cause of Death: Primary Typhoid Fever 1 | How long sick Some Time

Immediate Neglected | ~~Accident, Suicide, Homicide~~

Reported by Dr W. H. T. Gibbons

Address Bladensburg Md -

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Edward Davis

Certificate of Death

Died at Town Hyattsville County P. G. MARYLAND

Date 189 8 Month 11 Day 7 Age Y. 25. M. D. Native of American Occupation Laborer

Male ~~White~~ Married ~~Widow~~ Divorced

~~Female~~ Colored ~~Single~~ ~~Widower~~ Number of children living None

Husband ~~Wife~~ of Mary Davis

Father's Name Walter M. Davis Mother's Name Louisa Davis

Cause of Death Primary Typhoid fever 1 How long sick 5 weeks

Immediate Asthenia Accident, Suicide, Homicide

Reported by Dr. Ed Richardson

Address Hyattsville Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79706

Name in Full | Certificate of Death

Mrs Elizabeth Dunar

Died at — Town: Aquasco — County: P. G. Co — MARYLAND

Date 1898 — Month: Nov — Day: 21 — Age: Y. 57 M. 7 D. — Native of: U.S. — Occupation: Housekeeper

~~Male~~ White ~~Married~~ Widow ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living 8

~~Husband~~ Wife of The late Thomas Dunar.

Father's Name: Dunar — Mother's Name: Oliver

19

Cause of Death — Primary: Malignant Malarial — How long sick: Six Weeks

Immediate: Congestion of the Spleen — ~~Accident, Suicide, Homicide~~

Reported by: M. R. Latimer

Address: Aquasco Maryland.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 63968

Name in Full

Certificate of Death

Beatris Diggs

Died at Town: Near Westphalia. County: Prince George MARYLAND

Date 189 Month: Nov Day: 10 Age: Y. 9 M. D. Native of: Md Occupation

~~Male~~ Female ~~White~~ Colored ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living

~~Husband~~ Wife of

Father's Name: Charles Diggs Mother's Name: Harriet Talbert

Cause of Death: Primary: Croup 86 How long sick: one day

Immediate: Strangulation

~~Accident~~, ~~Suicide~~, ~~Homicide~~

Reported by: Scott Armstrong

Address: Forestville Md. [redacted] C

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Estella Gant

Certificate of Death

Died near Town New Glatz County Prince Georges MARYLAND

Date 1898 Month Nov. Day 11 | Age Y. 3 M. 6 D. | Native of P.G.Co. Md | Occupation

~~Male~~ Female ~~White~~ Colored ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living

Husband of Wife

Father's Name Nelson Benjamin Gant Mother's Name Margaret Ella Morris

Cause of Death { Primary Pneumonia 72 | How long sick 6 days

Immediate asphyxia ~~Accident, Suicide, Homicide~~

Reported by John A Cox M.D.

Address L.B. [redacted] Pr. Geo. Co.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 85088

Name in Full Joseph W. Gordon

Certificate of Death

Died at Town Rosaryville County P G Co MARYLAND

Date 1898 Month Nov Day 4 Age Y. 11 M. 6 D. Native of Md Occupation —

Male ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ Colored Single ~~Widower~~ ~~Number of children living~~

Husband / Wife of

Father's Name Frank Gordon Mother's Name Celia Gordon

Cause of Death Primary Typhoid fever 1 How long sick one week

Immediate Violet Delirium ~~Accident Suicide Homicide~~

Reported by Dr. W. H. Gibbons

Address Croom Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Blanche Jackson

Certificate of Death

Died at Town Accokeek County Prince Georges MARYLAND

Date 189 8 Month Nov. Day 23 Age Y. 4 M. — D. 3 Native of Md. Occupation —

~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored Single ~~Widower~~ ~~Number of children living~~

Husband of Wife —

Father's Name Fred. J. Jackson Mother's Name Eliza A Contee

Cause of Death Primary Pneumonia How long sick One week

Immediate ~~Accident, Suicide, Homicide~~

Reported by M. C. Tuvlis M.D.

Address Accokeek, P. G. Co.,

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

Talbot Johnson

Died at Town Mitchellsville County Prince George MARYLAND

Date 1898 Month Nov Day 28 Age Y. 12 M. D. Native of Prince George ~~Occupation~~

Male ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ Colored Single ~~Widower~~ ~~Number of children living~~

~~Husband~~ ~~Wife~~ of

Father's Name Thomas Johnson

Mother's Name Maria Johnson

Cause of Death Primary Malarial Fever (Remittent) How long sick 21 days

Immediate Pneumonia 29 ~~Accident, Suicide, Homicide~~

Reported by John Peach M.D.

Address Mitchellsville Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Certificate of Death

Fielder M Magneder

Died at Town Bettsville County Prince George MARYLAND

Date 1898 Month nov Day 9 Age Y. 70 ~~M.~~ D. Native of Ma Occupation Farmer

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living 8

Husband ~~Wife~~ of Mary Cummins

Father's Name Edward Magnus Mother's Name Theresa

Cause of Death Primary Chronic Pericarditis How long sick six months

Immediate do 55 Accident, ~~Suicide, Homicide~~

Reported by C A Fox

Address Bettsville Ma

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full: Emma Munson

Certificate of Death

Died at — Town: Piscataway — County: Prince Georges — MARYLAND

Date 1898 — Month: Nov. — Day: 6 — Age: Y. 5 M. 2 D. 19 — Native of: Md. — Occupation: —

~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored Single ~~Widower~~ ~~Number of children living~~ —

Husband / Wife of —

Father's Name: Henry Munson — Mother's Name: Lillie Dent

Cause of Death — Primary: Supposed to be Typhoid Fever — How long sick: about 2 weeks

Immediate: No Physician saw it — ~~Accident, Suicide, Homicide~~

Reported by: Father to W.C. Towles, M.D.

Address: Accokeek Prince Georges Co.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 55968

Name in Full: Clifton E. Penn

Certificate of Death

Died at — Town: Laurel — County: Pr Geo. — MARYLAND

Date 1898 — Month: Nov. — Day: 26 — Age: Y. 19. M. 1. D. 6 — Native of: Md — Occupation: School boy

Male — White — ~~Married~~ — ~~Widow~~ — Divorced

~~Female~~ — ~~Colored~~ — Single — Widower — Number of children living

Husband / Wife of

Father's Name: Edward Penn — Mother's Name: Rebecca Penn

Cause of Death — Primary: Typhoid Fever 1 — How long sick: 4 weeks

Immediate: Peritonitis (Ints. Perfora, — Accident, Suicide, Homicide

Reported by: J R Hunth M D.

Address: Laurel Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 68968

Name in Full Helen M. Plummer Plummer

Certificate of Death

Died at Town Bladensburg County P.G. MARYLAND

Date 189 8 Month Nov. Day 12 Age Y. M. D. 2, 24 Native of Md. Occupation —

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single ~~Widower~~ Number of children living

Husband of A. J. Plummer

Wife L. M. "

Father's Name A. J. Plummer

Mother's Name L. M. Ging

Cause of Death Primary Empiplas

Immediate Asthenia

How long sick 3 weeks

Accident, Suicide, Homicide

Reported by Dr. G. A. Richardson

Address Hyattsville Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Bryan Sansbury

Certificate of Death

Died at Town Broad Creek County Pr. Geo's MARYLAND

Date 1898 Month 11 Day 13 Age Y. 11 M. D. Native of Pr. Geo, Md Occupation ——

Male White ~~Married~~ ~~Widow~~ ~~Divorced~~

~~Female~~ ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~

Husband of Wife 78

Father's Name R. A. Sansbury Mother's Name Ella Sansbury

Cause of Death Primary Infectious Stomatitis How long sick

Immediate Bronchial Pneumonia ~~Accident, Suicide~~, Homicide

Reported by E. P. Simpson

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full James Smith

Certificate of Death

Died at Town Seat Pleasant County Prince George MARYLAND

Date 189 8 Month Nov Day 13 Age Y. 6 M. 2 D. Native of Md Occupation —

Male ~~Female~~ ~~White~~ Colored ~~Married~~ ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living

~~Husband~~ ~~Wife~~ of —

Father's Name James Smith

Mother's Name Nancy Small

Cause of Death: Primary Diphtheria 8a How long sick 24 hrs

Immediate Strangulation

~~Accident, Suicide, Homicide~~

Reported by John E Saunders MD

Address Forestville Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full — Certificate of Death

Infant - Unbaptized. Tapscott

Died at Town: Clinton County: P. Geo, Co MARYLAND

Date 1898 Month: Nov. Day: 28th | Age Y. 2 M. D. | Native of Va | Occupation Farmer

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ ~~Single~~ ~~Widowed~~ ~~Divorced~~ ~~Widower~~ ~~Number of children living~~

~~Husband~~ ~~Wife~~ of

Father's Name John Tapscott | Mother's Name Nina Tapscott

Cause of Death: Primary — Premature birth — How long sick One day

Immediate — Not known. 1386 — ~~Accident, Suicide, Homicide~~

Reported by John L. Waring. M. D.

Address Clinton Prince Geo. Co

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

Clara Adele Truman

Town

County

Died at Home near Orme P.O. Pr. Geo. Co MARYLAND

Date 189[illegible] Month Nov Day 21 | Age Y. 24 M. - D. 21 | Native of U.S. | Occupation None

~~White~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single ~~Widower~~ Number of children living

~~Husband~~ of ~~Wife~~

Father's Name Benj F. Truman

Mother's Name Margaret E Naylor

222

Cause of Death: Primary — Intestinal Tuberculosis — How long sick One Month

Immediate — Intestinal Hemorrhage — ~~Accident, Casualty, Homicide~~

Reported by W. R. Latimer

Address Aquasco Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full | Certificate of Death

Ann Sophonia Walker.

Died at Town: Woodmore County: Prince George's. MARYLAND

Date 1894 Month: Nov. Day: 16. Age Y.: 43. M.: 1. D.: 10 Native of: Maryland Occupation: Lady.

~~Male~~ White Married ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living 7

~~Husband~~ Wife of Edward S. Walker.

Father's Name Jeremiah Duckett Mother's Name Louisa Harvey.

Cause of Death: Primary Cancer of Stomach 25-65 How long sick 5 years.

Immediate Hemorrhage from Stomach ~~Accident, Suicide, Homicide~~

Reported by Benj^m L. Bird M.D.

Address Leeland P. G. Co. Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Mary Elizabeth Walter

Certificate of Death

Died at Town County Prince George MARYLAND

Date 1898 Month Nov. Day 16 | Age Y. 70 M. D. | Native of Md. | Occupation House-wife

~~Male~~ White Married Widow ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widow~~ Number of children living 9

~~Husband~~ of Wife John W. Walter.

Father's Name Mother's Name 81

Cause of Death: Primary Old age. How long sick

Immediate Gastro-enteritis ~~Accident, Suicide, Homicide~~

Reported by E. L. Huth.

Address Piscataway Maryland.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968